



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

January 26, 2012

Quick Links

[MA-ACA Website](#)



These Updates, published by the Executive Office of Health and Human Services (EOHHS) in consultation with the other state agencies involved in ACA implementation, will bring you news related to the implementation of provisions of the ACA here in Massachusetts.

Guidance

1/20/12 HHS announced a final rule requiring most health insurance plans to cover preventive services for women including recommended contraceptive services without charging a co-pay, co-insurance or a deductible in new private health plans in plan years that start on or after August 1, 2012. The rule allows certain non-profit religious employers that offer insurance to their employees the option of applying for an extra year to begin covering contraceptives. The final rule, which amends the interim rule issued in August 2011, is based largely on the Institute of Medicine's recommendation for preventive services for women, including all FDA -approved forms of contraception. Beginning August 1, 2012, most new and renewed health plans will be required to cover these services without cost sharing for women across the country.

The final rule adds that nonprofit employers who, based on religious beliefs, do not currently provide contraceptive coverage in their insurance plan, will be provided an additional year, until August 1, 2013, to comply with the new law. Employers wishing to take advantage of the additional year must certify that they qualify for the delayed implementation. The additional year will allow these organizations more time and flexibility to adapt to this new rule while also providing notice to employees that contraceptive services are available at alternative sites such as community health centers, public clinics, and hospitals with income-based support.

The final regulation keeps a narrow conscience clause, allowing faith-based nonprofits an extra year to begin covering contraceptives. Only organizations that are faith-based and primarily employ those of the same faith are eligible for the exemption. The transition will apply to religiously affiliated groups, such as hospitals, charities and universities that currently do not provide contraceptive services. Faith institutions such as churches, synagogues and mosques will continue to be exempt from the requirement, as well as primary or secondary schools

closely tied to them, HHS said. HHS estimated one million to two million people work for nonprofits with religious affiliations and potentially would receive new contraceptive coverage under the rule.

Read the statement issued by HHS Secretary Kathleen Sebelius at:

<http://www.hhs.gov/news/press/2012pres/01/20120120a.html>

1/20/12 CMS issued an informational bulletin and a set of frequently asked questions which provided guidance on the implementation of §6501, Termination of Provider Participation under Medicaid if Terminated under Medicare or other State Plan. The bulletin clarifies earlier CMS guidance provided in a May 31, 2011, Informational Bulletin and accompanying Frequently Asked Questions (FAQs) on ACA §6501.

Read the 1/20/12 bulletin at:

<http://www.medicaid.gov/Federal-Policy-Guidance/downloads/CIB-01-20-12.pdf> Read the May 31, 2011 Bulletin at:

<http://www.cms.gov/CMCSBulletins/downloads/6501-Term.pdf>

Prior guidance can be viewed at www.healthcare.gov

News

1/24/11 Rick Gilfillan, Acting Director of the Center for Medicare & Medicaid Innovations (CMMI) posted a blog entry on [healthcare.gov](http://www.healthcare.gov) about how a January 2012 **CBO report supports many of the initiatives underway at the CMMI**. The CBO report reviews the outcomes of several major demonstrations aimed at enhancing the quality of health care and improving the efficiency of health care delivery in its fee-for-service program conducted in the past decade and concludes that evaluations have shown that they have not reduced Medicare spending. The report recommends collecting better data, encouraging providers to work together and focusing resources on the patients who need it most. The projects underway at the CMMI are already working to adopt many of the CBO report's recommendations including: The Pioneer ACO and ACO Shared Savings models, the Community-Based Care Transitions Program, the Comprehensive Primary Care Initiative, and the Bundled Payments for Care Initiatives.

Read the [healthcare.gov](http://www.healthcare.gov) blog at:

<http://www.healthcare.gov/blog/2012/01/innovations01242011.html>

Learn more about the CMMI work at: <http://www.innovations.cms.gov/>

Read the CBO report at: <http://www.cbo.gov/ftpdocs/126xx/doc12663/01-18-12-MedicareDemoBrief.pdf>

1/23/12 Created under §6301 of the ACA, the Patient-Centered Outcomes Research Institute, or PCORI, released its National Priorities for Research and Research Agenda for public comment. PCORI is an independent nonprofit tasked with conducting patient-centered outcomes research and the Institute is asking the public to help define that term. PCORI was created to conduct research to provide information about the best available evidence to help patients and their health care providers make more informed decisions. PCORI's research is intended to give patients a better understanding of the prevention, treatment and care options available, and the science that supports those options. PCORI will update its definition based on public feedback from individuals and organizations and use the research agenda to guide future funding announcements for comparative effectiveness research. The draft National Priorities for Research listed five areas where this research is needed to support decision-making: 1) Assessment of options for prevention, diagnosis, and treatment; 2) improving health care systems; 3) communication and dissemination research; 4)

addressing disparities; and 5) accelerating patient-centered outcomes research and methodological research. Comments will be accepted until March 15, 2012 before a final version is adopted.

For more information, visit: <http://www.pcori.org/2012/research-prioritiesagenda/>

Read the National Priorities for Research and Research Agenda at:

<http://www.pcori.org/assets/PCORI-Draft-National-Priorities-and-Research-Agenda2.pdf>

Provide feedback at: <http://www.pcori.org/survey/priorities-agenda/>

1/18/12 Wisconsin Governor Scott Walker announced that he was returning the state's Exchange Early Innovator grant to HHS. In February 2011 Wisconsin received a grant for over \$37 million to help design and implement the information technology infrastructure needed to operate health insurance exchanges. Read the Governor's press release at: [Gov. Walker](#)

Governor Walker also returned a \$637,114 ACA consumer assistance grant from 2010. Wisconsin is the latest state to return ACA- related money. According to HHS, the states of Oklahoma and Kansas both stated that they would not use the Exchange Early Innovator grants (\$54 million and \$31 million, respectively) that they were awarded. Florida Governor Rick Scott returned \$1 million that was awarded to the state to begin implementation planning for health insurance exchanges and another \$1 million that would have funded a system to monitor premiums and insurance-rate changes.

Upcoming Events

Quarterly Affordable Care Act Implementation Stakeholder Meeting

Monday, March 12, 2012 from 2PM- 3PM

1 Ashburton Place, 21st Floor

Boston, MA

Money Follows the Person (MFP) Working Group

Thursday, February 2, 2012 from 2 PM - 3:30 PM

Saxe Conference Room

Worcester Public Library

3 Salem Square

Worcester, MA

Please contact MFP@state.ma.us to attend the MFP meetings and to request reasonable accommodations.

More information on MFP can be found at: [Money Follows the Person](#)

Bookmark the **Massachusetts National Health Care Reform website**

at: http://mass.gov/national_health_reform to read updates on ACA implementation in Massachusetts.

Remember to check <http://mass.gov/masshealth/duals> for information on the **"Integrating Medicare and Medicaid for Dual Eligible Individuals"** initiative.